2099

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 136

Co. Registrar's No. 276

Local Registrar's No. 1

PLACE OF BIRTH

County of Gila

District of Winkelman

Town of Winkleman
or
City of

(No. St: Ward)

FULL NAME OF CHILD Marion Elizabeth Sharrah

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Born Alive YES

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month)	(Day)	(Yr.)
Female	1		1	Yes	April	12	1921

FATHER		MOTHER	
Full Name	George Finley Sharrah	Full Maiden Name	Lula Evyln Barker
Residence	Winkleman Ariz	Residence	Winkleman Ariz
Color or Race	White	Color or Race	White
Age at last Birthday	48 Years	Age at last Birthday	24 Years
Birthplace	Missouri	Birthplace	Feldman Ariz.
Occupation	Laborer	Occupation	Housewife.

Number of child of this Mother 5 | Number of Children, of this mother, now living 2 | Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on April 12 1921, at 5:30 A.M.

*When there is no attending physician or midwife, then the householder should make this return.

Signature O. E. Wzinger M.D.
Attending physician, midwife, householder.*

Given or Christian name added from a supplemental report 191

Address Hayden Ariz.

Filed April 13 1921

W. J. Roberts
LOCAL REGISTRAR.

423-412-329
COUNTY REGISTRAR.

Filed May 7 1921

A True Copy

B. G. Fine
COUNTY REGISTRAR.

must be filed by the attending physician ... days after birth.